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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEES TRANSMITTAL For FY 2009		Application Number	10/049,327-Conf. #3596
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	August 10, 2000
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Jay M. Meythaler
\$ 555.00		Examiner Name	K.A. Cruz
		Art Unit	1617
		Attorney Docket No.	UAB-15102/22

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 07-1180			Deposit Account Name: Gifford, Krass, Sprintle, Anderson & Cikowski, P.C.	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below				<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17				<input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
							Fees Paid (\$)
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues) Fee (\$) Small Entity							
Each independent claim over 3 (including Reissues) Fee (\$) Small Entity							
Multiple dependent claims Fee (\$) Small Entity							
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 or HP		x	=		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)		
- 100 =		/50 =	(round up to a whole number) x	=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2253 Extension for response within third month Fee (\$)							
555.00							
SUBMITTED BY							
Signature	Avery N. Goldstein, Ph.D./			Registration No. (Attorney/Agent)	39,204	Telephone	(248) 647-6000
Name (Print/Type)	Avery N. Goldstein, Ph.D.			Date	September 4, 2009		